

CLAIMS ONLY

SERIAL NO.

09/ 707 787

FILING DATE

11-7-00

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
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21						
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23						
24						
25						
26						
27						
28						
29						
30	1		1			
31						
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42						
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45						
46						
47						
48						
49						
50						
TOTAL IND.	2		11			
TOTAL DEP.	28		127			
TOTAL CLAIMS	30		138			

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
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58						
59						
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61						
62						
63						
64						
65			1			
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73						
74						
75			1			
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86						
87						
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE		
							APPLICANT(S)			
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.
101							51			
102							52			
103							53			
104							54			
105							55			
106							56			
107							57			
108							58			
109							59			
110							60			
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114							64			
115							65			
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130							80			
131							81			
132							82			
133							83			
134							84			
135							85			
136							86			
137							87			
138							88			
139							89			
140							90			
141							91			
142							92			
143							93			
144							94			
145							95			
146							96			
147							97			
148							98			
149							99			
150							100			
TOTAL IND.							TOTAL IND.			
TOTAL DEP.							TOTAL DEP.			
TOTAL CLAIMS							TOTAL CLAIMS			